



More than a Legend

Development,

Village of Sleepy Hollow

Department of Architecture, Land Use

Buildings & Building Compliance

28 Beekman Avenue

Sleepy Hollow, NY 10591

Telephone (914) 366-5101 • Fax (914) 631-0607

APPLICATION FOR DEMOLITION PERMIT

Name of Property Owner:_____ Telephone No.:_____

Address of Property Owner:_____

Contact Person for Owner:_____ Telephone No.:_____

Name of Applicant:_____ Telephone No.:_____

Address of Applicant:_____

Address of Premises to be Demolished:_____

Date Demolition to Commence:_____

Length of Project:_____ If demolition to be done in phases, list phases
and length of time for each phase:_____

Site Manager (name, address and telephone number, including emergency numbers):_____

Cost of Demolition:_____

Brief Description of Demolition Process:_____

Other Required Agency Approvals:

A) Name of Agency:_____

B) Date Approved:_____

Required Submissions to accompany Application:

RECEIVED

- Demolition Insurance _____
- Certificate of Worker's Compensation Insurance _____
- Certificate of Disability Insurance _____
- Certificate of Liability Insurance naming Sleepy Hollow as insured _____
- Rodent Control Certification _____
- Correspondence from utility companies regarding Location of gas, electric and water _____
- Proof of notice to adjoining property owners _____
- Sedimentation and erosion control plan _____
- Asbestos project report (filings regarding air Clearance as they are received) Department of Labor _____
- Application Fee _____
- Design Engineer Report scooping demolition process _____
- Copies of other agency approvals, if received _____

Date: _____
Signature of Owner (if different)

Date: _____
Building Inspector Approval

